

STATE OF IOWA

TERRY E. BRANSTAD, GOVERNOR KIM REYNOLDS. LT. GOVERNOR

DEPARTMENT OF NATURAL RESOURCES

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IM REYNOLDS, LT. GOVERNOR	Roger L. Lande, Directo
Customer:	

Date:

Dear Customer,

In order to meet your request to change your residency status for purposes of acquiring **resident** licenses and privileges issued by the Iowa Department of Natural Resources, you will need to provide information supporting your eligibility. Resident status changes may only be made during normal business hours.

The department is requesting this information in accordance with lowa Code 483A.1A(9) and lowa Administrative Code 571-15.2 which state: "A person shall submit documentation to establish the person's principal and primary residence or domicile to the department or its designee upon request. The department or its designee shall keep confidential any document received pursuant to such a request if the document is required to be kept confidential by state or federal law."

Read this letter <u>carefully</u> and follow <u>all</u> directions. You must provide **EACH** step of information listed below. If you cannot provide the information as listed, fully explain why on this letter. Then, sign your initials in the box of <u>each</u> item on this letter, attach the accompanying documentation, and send to the Department. The more details you supply, the more efficient the process of determining your status.

In order to consider you a resident for licenses and privileges issued by the Department, you must sign and return this letter along with the supporting information to the following address as soon as possible:

LICENSING, LAW ENFORCEMENT BUREAU – RESIDENCY STATUS IOWA DEPARTMENT OF NATURAL RESOURCES 502 EAST 9TH STREET WALLACE STATE OFFICE BUILDING DES MOINES, IOWA 50319

If you prefer, you may fax (515-281-6794) your documents. When doing so, you <u>must include a copy of this letter</u>; you also must <u>then send the original</u> of this letter in the regular U.S. mail to the address above. Fax and regular mail are the only options for submittal of information. For your security, **DO NOT <u>E-MAIL ANY</u> DOCUMENTATION WHATSOEVER.** FURTHER, REMOVE YOUR SOCIAL SECURITY NUMBER FROM VIEW ON ALL DOCUMENTS.

To the Iowa Department of Natural Resources,

I have physically resided in lowa at my principal and primary residence or domicile for a period of not less than 90 consecutive days immediately before applying for or purchasing a resident privilege. Further, I do not currently claim residency nor hold any resident privileges in another state or country*. (*If you hold a lifetime license or similar

	e, fixed, and permanent home, and where, whenever I am briefly and temporarily t, I intend to return. I provide all of the following relevant factors as proof:
1.	☐ Issuance of an Iowa Driver's License or an Iowa Non-Operator's Identification card issued by the Iowa Department of Transportation. A front and back copy is provided here. (Note: Be sure that your social security number is not in view).
2.	☐ Proof of place of employment, which must include the address of the person's place of employment or business, including the area or region where a majority of the person's work is performed.
3.	Physical address, which shall be the person's 911 address(es) or the address of an immediate family member. A post office box or a forwarded address shall not be accepted by the department to verify the person's principal and primary residence or domicile.
4.	Utility records, which must include the person's name and be associated with the physical address provided for as the person's principal and primary residence or domicile. The types of records that may be submitted include rental and lease documents and telephone, cellular phone, electricity, water, sewer, cable or satellite television, and any other utility records.
5.	Real estate records, which include legal documents showing ownership or leasehold interests of any and all real estate related to the physical address used by the department to verify the person's principal and primary residence or domicile. These records should also provide the time period of such ownership or rental.
6.	$\hfill \Box$ Vehicle registration(s) for any vehicles owned or leased by the person and immediate family members.
7.	Documentation of homestead tax exemption allowed to the person or immediate family member(s) for all states in which such exemption is allowed.
8.	Documentation of any coinhabitants, other than the person's immediate family members, who use the same principal and primary residence or domicile.
DNR of status that I below.	ar and affirm that the information I have provided on and with this form is true and ate. I understand that my residency status WILL NOT be processed over the counter at a office location and that as many as 5-10 business days may be required for residency processing. Upon the Department's action regarding my residency status, I understand will be contacted by the DNR via phone, mail, or e-mail as I have provided on this letter REMINDERS: DO NOT <u>E-MAIL ANY</u> DOCUMENTATION WHATSOEVER JOING THIS LETTER AND BE SURE TO REMOVE YOUR SOCIAL SECURITY BER FROM VIEW ON ALL DOCUMENTS.
Signat	ure Date
Name	D.O.B:
Conta	ct preference(s) (mailing address, phone number, and/or e-mail address):

privilege from another state and that state allows you to continue holding that privilege, provide documentation from that state showing their allowance). **lowa is the one and only place I have**